

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled CATHODES FOR METAL AIR ELECTROCHEMICAL CELLS, the specification of which

☐ is attached hereto.

☒ was filed on October 26, 1999 as Application Serial No. 09/427,371 and was amended on _____

☐ was described and claimed in PCT International Application No. _____
filed on _____ and as amended under PCT Article 19 on _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Robert C. Nabinger, Reg. No. 33,431; John J. Gagel, Reg. No. 33,499; Celia H. Leber, Reg. 33,524; Christine P. Bellon, Reg. No. 41,611; Allison A. Johnson, Reg. No. 36,173; Sean P. Daley, Reg. No. 40,978; James W. Babineau, Reg. No. 42,276; Donal B. Tobin, Reg. No. 25,711; Paul I. Douglas, Reg. No. 31,244; Chester Cekala, Reg. No. 32,971; Stephan P. Williams, Reg. No. 28,546; Edward S. Podszus, Reg. No. 35,983; David A. Howley, Reg. No. 34,624; Thomas G. Krivulka, Reg. No. 38,525; and Charles P. Boukus, Jr., Reg. No. 24,754.

Address all telephone calls to Christine P. Bellon at telephone number 617/542-5070.

Address all correspondence to Robert C. Nabinger, Fish & Richardson P.C., 225 Franklin Street, Boston, MA 02110-2804.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full Name of Inventor: Edward Curelop

Inventor's Signature: Edward Curelop Date: 12/7/99

Residence Address: 34 Granite Street, Brockton, MA 02302

Citizen of: U.S.A.

Post Office Address: 34 Granite Street, Brockton, MA 02302

COMBINED DECLARATION AND POWER OF ATTORNEY CONTINUED

Full Name of Inventor: Sharon Lu

Inventor's Signature: _____ Date: _____

Residence Address: 46 Oriole Drive, Andover, MA 01810

Citizen of: People's Republic of China

Post Office Address: 46 Oriole Drive, Andover, MA 01810

Full Name of Inventor: Stephen McDevitt

Inventor's Signature: Stephen F. McDevitt Date: 12/7/99

Residence Address: 14 Powderhouse Terrace, Somerville, MA 02144

Citizen of: U.S.A.

Post Office Address: 14 Powderhouse Terrace, Somerville, MA 02144

Full Name of Inventor: David Pappas

Inventor's Signature: David L Pappas Date: 12/7/99

Residence Address: 40 Kings Way, #603A, Waltham, MA 02451

Citizen of: U.S.A.

Post Office Address: 40 Kings Way, #603A, Waltham, MA 02451

Full Name of Inventor: Joseph Sunstrom

Inventor's Signature: Joseph Sunstrom Date: 12/7/99

Residence Address: 176 Larson Road, Stoughton, MA 02072

Citizen of: U.S.A.

Post Office Address: 176 Larson Road, Stoughton, MA 02072

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Full Name of Inventor: Edward Curelop

Inventor's Signature: _____ Date: _____

Residence Address: 34 Granite Street, Brockton, MA 02302

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COMBINED DECLARATION AND POWER OF ATTORNEY CONTINUED

Full Name of Inventor: Sharon Lu

Inventor's Signature: Sharon Lu Date: 12/6/99

Residence Address: 46 Oriole Drive, Andover, MA 01810

Citizen of: People's Republic of China

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Inventor's Signature: _____ Date: _____

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Citizen of: U.S.A.

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